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OFFICE OF FINANCE
REFUND BRANCH
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

H14) Reg for
refund
11-19-01

Art Unit: 2819

2003 MAY 15 PM 4:19

Examiner: Tran, A.

US PATENT & TRADEMARK
OFFICE

Applicant: Michael T. Moore

Serial No.: 09/804,523

Filed: March 12, 2001

REQUEST FOR REFUND

For: CONFIGURABLE DEDICATED LOGIC IN CPLDS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

An \$18.00 refund to Deposit Account No. 50-0541 is requested for the above-identified application. The \$18.00 extra claim fee was paid on February 12, 2003 with a PTO-2038 Form (copies of date-stamped postcard, PTO-2038 Form, transmittal and credit card statement attached) when an amendment was filed. Deposit Account No. 50-0541 was charged an additional \$18.00 to pay for the extra claim on 3/6/03 under Control No. 11 (copy of deposit account statement attached).

Please refund the additional \$18.00 to Deposit Account No. 50-0541. Thank you for your cooperation in this matter.

Respectfully submitted,

By: 

Christopher P. Maiorana
Reg. No. 48,829
CHRISTOPHER P. MAIORANA, P.C.
24025 Greater Mack, Suite 200
St. Clair Shores, MI 48080
(586) 498-0670

Date: May 7, 2003

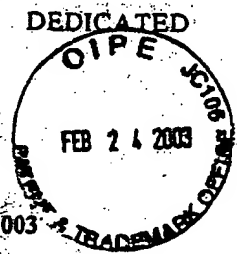
Docket No.: 0325,00361



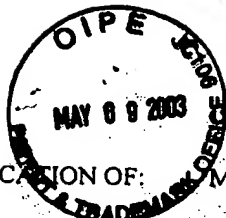
Please date stamp and return this Postcard
knowledging receipt of the following:

Response Transmittal (1 page in duplicate); Amendment
(19 pages); PTO-2038 Form for \$18.00.

Applicant: Michael T. Moore
For: CONFIGURABLE
Serial No. 09/804,523
Filing Date: March 12, 2001
Attorney: CPM
Docket No: 0325.00361



Via First Class Mail on February 12, 2003



Attorney Docket: 0325.00361

IN RE APPLICATION OF: Michael T. Moore

SERIAL NO.: 09/804,523

RESPONSE TRANSMITTAL AND
EXTENSION OF TIME REQUEST
(IF REQUIRED)

TITLE: CONFIGURABLE DEDICATED LOGIC IN CPLDS

FILED: March 12, 2001

EXAMINER: Tran, A.

ART UNIT: 2819

ASSISTANT COMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Enclosed please find an Amendment and a postcard along with the fee calculation below:

FEE CALCULATION FOR ENCLOSED AND EXTENSION REQUEST (IF ANY)

	Claims Remaining	Highest No. Previous	Extra Rate	Additional Fee
Total Claims	23 minus	22 -	1 x \$ 18.00	\$18.00
Independent Claims	3 minus	3 -	0 x \$ 84.00	\$ 0.00
Multiple Dependent Claim First Added			+ \$280.00	\$ 0.00

TOTAL IF NOT SMALL ENTITY . \$18.00

- [] SMALL ENTITY STATUS - If applicable, divide by 2 \$0.00
- [] Verified statement enclosed, if not previously filed. \$0.00
- [] Applicant also requests a _____ month extension of time
for response to the outstanding Office Action. The fee is \$0.00
- [] Fee set forth in 37 C.F.R. 1.17 (p) for Information Disclosure
under 37 C.F.R. 1.97 (c) \$0.00
- TOTAL FEE \$18.00

The Commissioner is hereby authorized to charge any overpayment or underpayment of the above fee associated with this Communication to Deposit Account No. 50-0541. A duplicate copy of this sheet is attached.

CHRISTOPHER P. MAIORANA, P.C.

24025 Greater Mack, Suite 200
St. Clair Shores, Michigan 48080
(586) 498-0670

By: Robert M. Miller
Robert M. Miller
Registration No.: 42,892

I hereby certify that this letter, the response or amendment attached hereto are being deposited with the United States Postal Service as first class mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231, on February 12, 2003.

By: Mary Donna Berkley
Mary Donna Berkley